

FILED
ASHEVILLE, N.C.
FEB 27 2009
U.S. DISTRICT COURT
W. DIST. OF N.C.

1 Kathy Wahler (purported defendant)
2 In Care of Postal Department 681
3 Buncombe: the county
4 Fletcher: North Carolina:
5 on the land 28732
6 In Propria Persona (not Pro Se)
7 Without counsel

8
9 IN THE UNITED STATES DISTRICT COURT
10 FOR THE WESTERN DISTRICT OF NORTH CAROLINA
11 ASHEVILLE DIVISION

12 UNITED STATES OF AMERICA,
Plaintiff,
vs.
KATHY RAY WAHLER,
EDWARD WILLIAM WAHLER,
LEWIS VINCENT HUGHES,
RICHARD WALSER TURNER,
Defendant.

) Case No.: 1:08-CR-00055-RLV-DCK-~~X~~1
)
) **SUBMISSION OF NAMED DEFENDANT**
) **FOR SETTLEMENT AND CLOSURE**
)
)
)
)
)

13
14 Now comes Kathy Wahler (purported defendant) and respectfully notices this court and judge by
15 submitting the DEFENDANT into court's possession and custody for settlement and closure.
16 Documents are attached.

17 Respectfully submitted this 27 day of February 2009.

18
19
20
21 

22 Kathy Wahler (purported defendant), Authorized Representative
23 Good as aval

1 CERTIFICATE OF SERVICE

2
3 COPY of the forgoing hand delivered,
4 This 27 day of February, 2008, to:

5
6 Assistant U.S. Attorney

7 Jill Rose

8 Asheville, North Carolina _____

9
10
11
12
13 Service performed by:

14 Kwale

15 PO Bop 681

16 Fletcher NC 28732

2640

NORTH CAROLINA STATE BOARD OF HEALTH
OFFICE OF VITAL STATISTICS

CERTIFICATE OF LIVE BIRTH

REGISTRATION
DISTRICT NO. 11-95REGISTRAR'S
CERTIFICATE NO.

1. PLACE OF BIRTH a. COUNTY Buncombe		b. TOWNSHIP Asheville		2. USUAL RESIDENCE OF MOTHER (Where does mother live?) a. STATE North Carolina		b. COUNTY Buncombe	
c. CITY OR TOWN Asheville		Is Place of Birth Within City Limits? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		c. CITY OR TOWN W- Asheville		Is Place of Residence In City Limits? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> On a Farm? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
d. FULL NAME OF (If NOT in hospital or institution, give street address or location) HOSPITAL OR INSTITUTION St. Joseph's				d. STREET ADDRESS or R. F. D. NO. 39 Tremont St.,			
CHILD	3. FULL NAME (Type or Print) First Middle Last Kathy Marie Ray						
	4. SEX female	5a. THIS BIRTH SINGLE <input checked="" type="checkbox"/> TWIN <input type="checkbox"/> TRIPLET <input type="checkbox"/>		5b. IF TWIN OR TRIPLET, was child born 1st <input type="checkbox"/> 2nd <input type="checkbox"/> 3rd <input type="checkbox"/>		6. DATE OF BIRTH Month Day Year November 14, 1961	
FATHER	7. FULL NAME First Middle Last Carter Locke Ray						
	9. AGE (At time of this birth) 20 YEARS		10. BIRTHPLACE (State or foreign country) N.C.		11a. USUAL OCCUPATION Emp: Three Mountaineers		8. COLOR OR RACE white
MOTHER	12. FULL MAIDEN NAME First Middle Last Betty Jean Higgins						
	14. AGE (At time of this birth) 20 YEARS		15. BIRTHPLACE (State or foreign country) N.C.		16. PREVIOUS DELIVERIES TO MOTHER (Do NOT include this birth) a. How many OTHER children are now living? 0		b. How many OTHER children were born alive but are now dead? 0
17. INFORMANT'S NAME AND RELATION TO CHILD Mrs. C.L. Ray - mother				c. How many fetal deaths (fetuses born dead at ANY time after conception)? 0			
18. MOTHER'S MAILING ADDRESS (If different from USUAL RESIDENCE)							
I hereby certify that this child was born alive on the date stated above 11-12-61 at 4:12 A.M. P.M.				19a. ATTENDANT'S SIGNATURE Roy M. Peacock		M. D. <input checked="" type="checkbox"/> MIDWIFE <input type="checkbox"/> OTHER (Specify) <input type="checkbox"/>	
				19b. ADDRESS Asheville, N.C.		19c. DATE SIGNED 11-14-61	
20. DATE REC'D BY LOCAL REG. 11-16-61		21. REGISTRAR'S SIGNATURE H.W. Stevens, M.D.			22. HAS MOTHER INSPECTED CERTIFICATE FOR ACCURACY OF INFORMATION? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		
23. DATE NAME ADDED BY STATE REGISTRAR				24. DATE AMENDED			

North Carolina,
Buncombe County

I, OTTO W. DEBRUHL, Register of Deeds of Buncombe County, do hereby certify that the above information is from Volume 50

Page 2640 of the records of Vital Statistics for Buncombe County, North Carolina.

Witness my hand and official seal this the 3 day of September 1993

Julia K. Buckner
By: Asst. / Deputy / Register of Deeds

Register of Deeds

AFFIDAVIT OF INDIVIDUAL SURETY
(See instructions on reverse)

OMB No.: 9000-0001

Public reporting burden for this collection of information is estimated to average 3 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Regulatory Secretariat (MVA), Office of Acquisition Policy, GSA, Washington, DC 20405.

STATE OF
NORTH CAROLINA

COUNTY OF
Buncombe

SS.

I, the undersigned, being duly sworn, depose and say that I am: (1) the surety to the attached bond(s); (2) a citizen of the United States; and of full age and legally competent. I also depose and say that, concerning any stocks or bonds included in the assets listed below, that there are no restrictions on the resale of these securities pursuant to the registration provisions of Section 5 of the Securities Act of 1933. I recognize that statements contained herein concern a matter within the jurisdiction of an agency of the United States and the making of a false, fictitious or fraudulent statement may render the maker subject to prosecution under Title 18, United States Code Sections 1001 and 494. This affidavit is made to induce the United States of America to accept me as surety on the attached bond.

1. NAME (First, Middle, Last) (Type or Print)

KATHY RAY WAHLER

2. HOME ADDRESS (Number, Street, City, State, ZIP Code)

**13 PINE BURR RD.
ASHEVILLE N.C. 28806**

3. TYPE AND DURATION OF OCCUPATION

4. NAME AND ADDRESS OF EMPLOYER (If Self-employed, so State)

5. NAME AND ADDRESS OF INDIVIDUAL SURETY BROKER USED (If any)
(Number, Street, City, State, ZIP Code)

**DEPOSITORY TRUST COMPANY
55 WATER ST. NEW YORK, NEW YORK 10041**

6. TELEPHONE NUMBER

**HOME - 828-674-1702
BUSINESS - 828-254-4546**

7. THE FOLLOWING IS A TRUE REPRESENTATION OF THE ASSETS I HAVE PLEDGED TO THE UNITED STATES IN SUPPORT OF THE ATTACHED BOND:

(a) Real estate (Include a legal description, street address and other identifying description; the market value; attach supporting certified documents including recorded lien; evidence of title and the current tax assessment of the property. For market value approach, also provide a current appraisal.)

**SS # 238-23-9101
BIRTH CERTIFICATE 11-95**

(b) Assets other than real estate (describe the assets, the details of the escrow account, and attach certified evidence thereof).

8. IDENTIFY ALL MORTGAGES, LIENS, JUDGEMENTS, OR ANY OTHER ENCUMBRANCES INVOLVING SUBJECT ASSETS INCLUDING REAL ESTATE TAXES DUE AND PAYABLE.

9. IDENTIFY ALL BONDS, INCLUDING BID GUARANTEES, FOR WHICH THE SUBJECT ASSETS HAVE BEEN PLEDGED WITHIN 3 YEARS PRIOR TO THE DATE OF EXECUTION OF THIS AFFIDAVIT.

DOCUMENTATION OF THE PLEDGED ASSET MUST BE ATTACHED.

10. SIGNATURE



11. BOND AND CONTRACT TO WHICH THIS AFFIDAVIT RELATES (Where appropriate)

OPTIONAL FORM 90 AND 91

12. SUBSCRIBED AND SWORN TO BEFORE ME AS FOLLOWS:

a. DATE OATH ADMINISTERED

MONTH DAY YEAR

Feb 26 2009

b. CITY AND STATE (Or other jurisdiction)

Fletcher NC

c. NAME AND TITLE OF OFFICIAL ADMINISTERING OATH
(Type or print)

Jean W Aiken

d. SIGNATURE



e. MY COMMISSION
EXPIRES

01-01-2010

Official
Seal

AUTHORIZED FOR LOCAL REPRODUCTION
Previous edition is not usable

STANDARD FORM 28 (REV. 6/2003)
Prescribed by GSA-FAR (48 CFR) 53.228(e)

RELEASE OF LIEN ON REAL PROPERTY

Whereas KATHY RAY WAHLER, of 13 PINE BURR RD. ASHEVILLE, NORTH CAROLINA 28806, by a bond
(Name) (Place of Residence)
for the performance of U.S. Government Contract Number 238-23-9101,
became a surety for the complete and successful performance of said contract, which bond
includes a lien upon certain real property further described hereafter, and
Whereas said surety established the said lien upon the following property

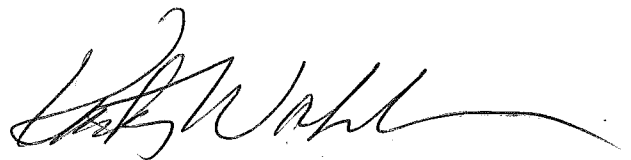
and recorded this pledge on F45252516
in the ASHEVILLE (Name of Land Records) of NORTH CAROLINA
(Locality) (State)
and

Whereas, I, Kathy Ray Wahler, being a duly
authorized representative of the United States Government as a warranted contracting
officer, have determined that the lien is no longer required to ensure further performance of
the said Government contract or satisfaction of claims arising therefrom,
and

Whereas the surety remains liable to the United States Government for continued
performance of the said Government contract and satisfaction of claims pertaining thereto.

Now, therefore, this agreement witnesseth that the Government hereby releases the
aforementioned lien.

2/26/09
[Date]



[Signature]
Seal

02-26-2009
John W. Aiken
Notary Public
Comm Exp - Herd. Cty.
07-01-2010

RELEASE OF PERSONAL PROPERTY FROM ESCROW

Whereas KATHY RAY WAHLER ^{13 PINE BURR RD.} ASHEVILLE, NORTH CAROLINA 28806, by a bond
(Name) (Place of Residence)
for the performance of U.S. Government Contract Number 238-23-9101,
became a surety for the complete and successful performance of said contract, and Whereas
said surety has placed certain personal property in escrow
in Account Number F45252516 on deposit
at DEPOSITORY TRUST COMPANY
(Name of Financial Institution)

located at 55 WATER STREET NEW YORK, NEW YORK 10041
(Address of Financial Institution)

Whereas I, Kathy Ray Wahler, being a duly authorized
representative of the United States government as a warranted contracting officer, have
determined that retention in escrow of the following property is no longer required to ensure
further performance of the said Government contract or satisfaction of claims arising
therefrom:

and

Whereas the surety remains liable to the United States Government for the continued
performance of the said Government contract and satisfaction of claims pertaining thereto.

Now, therefore, this agreement witnesseth that the Government hereby releases from escrow
the property listed above, and directs the custodian of the aforementioned escrow account to
deliver the listed property to the surety. If the listed property comprises the whole of the
property placed in escrow in the aforementioned escrow account, the Government further
directs the custodian to close the account and to return all property therein to the surety, along
with any interest accruing which remains after the deduction of any fees lawfully owed to

DEPOSITORY TRUST COMPANY
(Name of Financial Institution)

2/26/09
[Date]

[Signature]
[Signature]
02-26-2009

Seal

[Signature]
Notary Public - Ind. Ct. 4.
Comm Exp 07-01-2010